

Making healthcare work for young people

McDonagh, Janet E; Farre, Albert; Gleeson, Helena; Rapley, Tim; Dovey-Pearce, Gail; Reape, Debbie; Rigby, Emma; Colver, Allan F; Parr, Jeremy R; Transition Collaborative Group

DOI:

[10.1136/archdischild-2017-314573](https://doi.org/10.1136/archdischild-2017-314573)

License:

None: All rights reserved

Document Version

Peer reviewed version

Citation for published version (Harvard):

McDonagh, JE, Farre, A, Gleeson, H, Rapley, T, Dovey-Pearce, G, Reape, D, Rigby, E, Colver, AF, Parr, JR & Transition Collaborative Group 2018, 'Making healthcare work for young people', *Archives of Disease in Childhood*. <https://doi.org/10.1136/archdischild-2017-314573>

[Link to publication on Research at Birmingham portal](#)

Publisher Rights Statement:

Checked for eligibility: 27/02/2018

<http://adc.bmj.com/content/early/2018/01/05/archdischild-2017-314573>

General rights

Unless a licence is specified above, all rights (including copyright and moral rights) in this document are retained by the authors and/or the copyright holders. The express permission of the copyright holder must be obtained for any use of this material other than for purposes permitted by law.

- Users may freely distribute the URL that is used to identify this publication.
- Users may download and/or print one copy of the publication from the University of Birmingham research portal for the purpose of private study or non-commercial research.
- User may use extracts from the document in line with the concept of 'fair dealing' under the Copyright, Designs and Patents Act 1988 (?)
- Users may not further distribute the material nor use it for the purposes of commercial gain.

Where a licence is displayed above, please note the terms and conditions of the licence govern your use of this document.

When citing, please reference the published version.

Take down policy

While the University of Birmingham exercises care and attention in making items available there are rare occasions when an item has been uploaded in error or has been deemed to be commercially or otherwise sensitive.

If you believe that this is the case for this document, please contact UBIRA@lists.bham.ac.uk providing details and we will remove access to the work immediately and investigate.

Making Healthcare Work for Young People

Janet E McDonagh¹, Albert Farre², Helena Gleeson³, Tim Rapley⁴, Gail Dovey-Pearce⁵, Debbie Reape⁵, Emma Rigby⁶, Allan Colver⁴, Jeremy R Parr⁷ on behalf of the Transition Collaborative Group.

¹Centre for Musculoskeletal Research, University of Manchester, Manchester, UK*

²School of Health and Population Sciences, University of Birmingham, Birmingham, UK

³Department of Endocrinology, University Hospital Birmingham, Birmingham, UK

⁴Institute of Health and Society, Newcastle University, Newcastle upon Tyne, UK

⁵Northumbria Healthcare NHS Foundation Trust, Tyne and Wear, UK

⁶Association of Young People's Health, 32-26 Loman Street, London, UK

⁷Institute of Neuroscience, Newcastle University, Newcastle upon Tyne, UK

* *Corresponding author:* Centre for Musculoskeletal Research, Stopford Building, University of Manchester, Oxford Rd, Manchester M13 9PT, email: janet.mcdonagh@manchester.ac.uk Tel: 0161 275 1670

Word Count:350

Dear Editor, We would like to report the clinical translation of research reported in this journal regarding implementation of developmentally appropriate healthcare for young people [1,2]. An NHS toolkit is now available to support the implementation of developmentally appropriate healthcare in hospitals in the UK and globally.

Adolescent health is a neglected yet pressing global issue affecting the largest generation in human history [3]. However, increasing knowledge on adolescent and young adult development offers equally unprecedented opportunities to transform traditional models of healthcare delivery to create adolescent-responsive health systems [3]. In countries such as the UK, where adolescent medicine is not a recognised medical speciality, the routine embedding of *developmentally appropriate healthcare for young people* has the potential to enable system-wide adolescent-responsive healthcare delivery. In the recent NICE guidance for transition, it was highlighted that transitional care should be “developmentally appropriate” [4]. However, there is still the need for further guidance on the practical implementation of developmentally appropriate healthcare for young people, as a core element of clinical work that goes beyond the remit of transitional care and articulates the care provided for all young people attending health services. Furthermore, as we have previously reported in this journal, developmentally appropriate healthcare is ill-defined in the literature [1] and not consistently understood by UK-based health practitioners and managers [2].

In response to our research findings, we developed an NHS toolkit (within a wider Programme of Research funded by the National Institute for Health Research (see <http://research.ncl.ac.uk/transition/>). The NHS toolkit gives practical suggestions about 1. how healthcare can be tailored for the young person and multidisciplinary team, across an institution; and 2. being responsive to young people’s needs as they develop and change during adolescence and young adulthood. The toolkit can be accessed at <https://northumbria.nhs.uk/dahtoolkit> and is designed to support everyone working in the NHS, from clinicians to chief executives, to promote the health of young people and to play their part in making healthcare work for this particular group.

We hope the toolkit will be useful to health professionals as we move toward the NHS becoming a truly adolescent-responsive health system.

References

1. Farre A, Wood V, Rapley T, *et al.* Developmentally appropriate healthcare for young people: a scoping study. *Arch Dis Child* 2015;**100**:144–51. doi:10.1136/archdischild-2014-306749
2. Farre A, Wood V, McDonagh JE, *et al.* Health professionals' and managers' definitions of developmentally appropriate healthcare for young people: conceptual dimensions and embedded controversies. *Arch Dis Child* 2016;**101**:628–633. doi:10.1136/archdischild-2015-309473
3. World Health Organization. Towards adolescent-responsive health systems: Steering the transition from adolescent-friendly projects to adolescent-responsive health systems. 2014.
<http://apps.who.int/adolescent/second-decade/section6/page8/sdolescent-responsiveness.html>
(accessed 30/11/17).
4. National Institute for health and Care Excellence. Transition from children's to adults' services for young people using health or social care services. (NICE guideline 43) 2016.
<https://nice.org.uk/guidance/NG43> (accessed 30/11/17).